EXHIBIT D

WHITE&CASE

May 10, 2016

VIA E-MAIL AND UPS

Mr. Michael Fisher United States District Court Southern District of NewYork Probation Office 500 Pearl Street New York, NY 10007-1312 White & Case ... P 1155 Avenue of the Americas New York, NY 10036-2787 T +1 212 819 8200

whitecase.com

United States v. Evgeny Buryakov, 15 Cr. 73 (RMB)

Scott & Hushman

Dear Mr. Fisher:

We are counsel to Defendant Evgeny Buryakov in this action. Enclosed please find Defendant's financial affidavits.

We spoke earlier about the Monthly Cash Flow Statement. As we discussed, Mr. Buryakov's spouse resides in Russia with their two young children. As discussed, we have included salary information for Mr. Buryakov's wife, and have not otherwise included a detailed breakdown of the household's monthly expenses. We note, for completeness, that Mrs. Buryakova, as a single mother raising two children on a monthly net salary of US\$1,384, obviously has household expenditures that are not reflected on this form.

Please feel free to contact me at the number below for any further information.

Sincerely,

Scott E. Hershman

T +1 212 819 8366 E scott.hershman@whitecase.com

Enclosure



# UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK PROBATION OFFICE

# Instructions for Completing the Financial Affidavits

The attached financial forms include two financial affidavits: a long version (Probation Form 48) and an abbreviated version (Probation Form 48EZ). You are instructed to complete whichever form provides a <u>complete</u> picture of your financial condition. However, if Sections J, K, N, or P under "Assets" or Section B under "Liabilities" from the long form are applicable, you <u>must</u> complete Probation Form 48- the long form. Whichever form you use must be completed <u>in its</u> entirety.

Please note that you must complete the Monthly Cash Flow Statement and the Necessary Monthly Cash Outflows Form whether you file a long or short form financial affidavit with the Probation Office.

\* Kindly read the instructions for completing the net worth statement or the net worth short form statement, and the monthly cash flow statement before filling in these forms.

October 2001

►PROB 48A (9/00) Page I of 2

# REQUEST FOR NET WORTH STATEMENT FINANCIAL RECORDS DEFENDANT'S FULL NAME DOCKET NUMBER All entries on the Net Worth Statement must be accompanied by supporting documentation. Provide the probation officer with all records listed below that are applicable to your financial statements, along with your completed Net Worth Statement by the close of business

#### **ASSETS**

#### Section A - Bank Accounts

Most recent bank account statements (e.g., checking, savings, credit union, money market, brokerage, Certificate of Deposit, or savings bonds) for a three-month period, along with canceled checks.

#### Section B - Securities

 Most recent securities account statements (e.g., brokerage, annuities, life insurance, IRA, KEOGH, 401K, or thrift savings account) for a three-month period.

#### Section C - Notes & Accounts Receivable

· Copy of signed note receivable.

#### Section D - Life Insurance

 Copy of all life insurance policies (e.g., whole life, variable life, term).

### Section E - Safe Deposit Boxes or Storage Facilities

 Copy of most recent rental invoice for all safe deposit boxes or storage facility rentals within the past year, including receipts or verification of content value.

### Section F - Motor Vehicles

• Copy of vehicle registration and title for all vehicles owned or leased.

#### Section G - Real Estate

 Copy of purchase agreement, deeds, and escrow statement for all real property.

#### Section H - Mortgage Loans Owed To You

 Copy of the sales agreement and escrow statement for all real property.

## Section I - Other Assets

 Copy of purchase invoice and appraisal (if already previously obtained), and documentation to verify the fair market value of the asset.

#### Section J - Anticipated Assets

Copy of documentation to verify future receipt of anticipated asset, (e.g., claim or lawsuit filings, profit sharing plan and current statement, pension plan and current statement, inheritance documents, copy of all trusts, trust income tax returns), and most recent accounting reflecting the value of your interest and income from the trust.

#### Section K - Business Holdings

In addition to providing the information requested in Section K and completing Section N, provide copies of all income tax returns for each business you had an ownership interest in (e.g., shareholder, partner, proprietor) or an affiliation with (e.g., officer, director, board member, agent, associate) within the last five years. Also provide all financial statements for each business, prepared by you or your accountant, within the past five years.

#### Business Accounts Receivable

 Copy of current month's billing statements that verify business accounts receivable.

#### **Business Accounts Pavable**

 Copy of current month's vendor invoices that verify business accounts payable.

# Section L - Income Tax Returns

Copy of the five most recent years' income tax returns filed for: Individual (Form 1040), Partnership (Form 1065), Corporation (Form 1120), S Corporation (Form 1120S), and Limited Liability Company (Form 1065). Be sure to include all related schedules and forms. Provide a written explanation for any returns not filed.

#### Section M - Transfer of Assets

Copy of the bill of sale, documentation of funds received from sale (e.g., a personal or business check, cashiers check or money order), copy of vehicle registration and title of sold vehicle, and escrow closing statements for any real estate sold since the date of your

# Section N - Names of Shareholders or Partners

 Copy of Articles of Incorporation for all corporations you own or have an interest in. Copy of partnership agreement for all partnerships you have an ownership interest in. **♦**PROB 48A (9/00)

Page 2 of 2

| REQUEST FOR NET WORTH STAT   | EMENT FINANCIAL RECORDS (cont.) |
|--|---------------------------------|
| LIABILITIES  | OTHER RECORDS REQUESTED         |
| Section A - Charge Accounts  |                                 |
| ◆ Copy of most current billing statement for all charge accounts (e.g., credit cards, revolving charge cards, and department store cards) and lines of credit (e.g., bank line of credit). |                                 |
| Section B - Other Debts  |                                 |
| Copy of all notes payable, mortgage loans, current statement of<br>delinquent taxes due, and statements documenting child support/<br>alimony obligations and payment history.             |                                 |
| Section C - Party to Civil Suit  |                                 |
| ♦ Copy of all civil suit filings and judgments.  |                                 |
| Section D - Bankruptcy Filings   |                                 |
| ♦ Copy of all bankruptcy filings including petition, financial statements submitted, final judgment and order of discharge.  |                                 |
| A personal interview has been scheduled for you with:  |                                 |
|  |                                 |
| U.S. Probation Officer   | on<br>Date                      |
| at Office Location   |                                 |
| Time   |                                 |
| Telephone _  |                                 |
|  |                                 |

►PROB 48B (9/00)

| Last Name | First Name | Middle Name | Social Security<br>Number |
|-----------|------------|-------------|---------------------------|
| BURYAKEV  | Erseny     |             | Redacted                  |

# Instructions for Completing Monthly Cash Flow Statement

Having been convicted in the United States District Court, you are required to prepare and file with the probation officer a statement fully describing your financial resources, including a complete listing of all monthly cash inflows and outflows.

If you are placed on probation or supervised release (or other types of supervision), you may be periodically required to provide updated information fully describing your financial resources and those of your spouse, significant others, or dependents, as described above, to keep a probation officer informed concerning compliance with any condition of supervision, including the payment of any criminal monetary penalties imposed by the court (see 18 U.S.C. § 3603).

Amendments were made to 18 U.S.C. §§ 3663 (a)(1)(B)(i), 3664(d)(3), and 3664(f)(2), and Rule 32(b)(4)(F) to clarify that the assets owned, jointly owned, or controlled by a defendant; liabilities, and the financial needs and earning ability of a defendant and a defendant's dependents are all relevant to the court's decision regarding a defendant's ability to pay. Your Cash Flow Statement should include assets or debts that are yours alone (I-Individual), assets or debts that are jointly (J-Joint) held by you and a spouse or significant other, assets or debts that are held by a spouse or significant other (S-Spouse or Significant Other) that you enjoy the benefits of or make occasional contributions toward, and assets or debts that are held by a dependent (D-Dependent) living in your home that you enjoy the benefits of or make occasional contributions toward.

Please complete the Monthly Cash Flow Statement in its entirety. You must answer "None" to any item that is not applicable to your financial condition. Attach additional pages if you need more space for any item. All entries must be accompanied by supporting documentation (see Request for Cash Flow Statement Financial Records (Prob. 48C)). Initial and date each page (including any attached pages) and sign and date the last page of the Cash Flow Statement.

PROB 48B (9/00)

Page 2 of \_\_\_\_\_

| Last Name - BIRYALCV   |             |            |
|--|-------------|------------|
| MONTHLY CASH FLOW STATEME  | NT          |            |
| Monthly Cash Inflows   |             |            |
| Defendant  | Gross       | Net        |
| Your Salary/Wages (List both monthly gross earnings and take-home pay after payroll deductions.)   | Voue        | None       |
| Your Cash Advances (List all payroll advances or other advances from work.)  | None        | None       |
| Your Cash Bonuses (List all payments from work in addition to your salary that are not an advance.)  | None        | None       |
| Commissions (List all non-employee earnings as an independent contractor.)   | None        | None       |
| Business Income (List both monthly gross income and net income after deducting expenses.)  | None        | None       |
| Interest (List all interest carned each month.)  | None        | None       |
| Dividends (List all dividends earned each month.)  | None        | None       |
| Rental Income (List all monthly income received from real estate properties owned.)  | None        | None       |
| Trust Income (List all trust income earned each month.)  | None        | None       |
| Alimony/Child Support (List all alimony or child support payments received each month.)  | None        | None       |
| Social Security (List all payments received from Social Security.)   | None        | None       |
| Other Government Benefits (List all amounts received from the government not yet reported (e.g., Aid to Families with Dependent Children.)   | None        | None       |
| Pensions/Annuities (List all funds received from pensions and annuities each month.)   | None        | None       |
| Allowances-Housing/Auto/Travel (List all funds received from housing allowances, auto allowances, travel allowances, and any other kind of allowance.)   | Nene        | N'ene      |
| Gratuities/Tips (List all gratuities and tips received each month from any and all sources.)   | None        | N'one      |
| Spouse/Significant Other Salary/Wages (List all gross and net monthly salary and wages received by your spouse or significant other.)  | + 1,603,00  | \$1,324.00 |
| Other Joint Spousal Income (List any monthly income jointly earned with your spouse or significant other [e.g., any income from spouse or income from a business owned or operated by the spouse that you have a joint ownership interest in or control]). | Neue        | None       |
| Income of Other In-House (List all monthly income of others living in the household or the monthly amount actually paid for household bills by these persons.)   | Neue        | None       |
| Gifts from Family (List all amounts received as gifts from family members each month.)   | Noue        | N'ene      |
| Gifts from Others (List all gifts received from any sources not yet reported.)   | Noue        | NUIR       |
| Loans from Your Business (List all loan amounts received each month from all businesses owned or controlled by you.)   | Neme        | Noue       |
| Mortgage Loans (List all amounts received each month from mortgage loans owed to you.)   | Nene        | N'011 E    |
| Other Loans (List all other loan amounts received each month not yet reported.)  | None        | None       |
| Other (specify) (List all other amounts received each month not yet reported.)   | N'ane       | None       |
| TOTALS   | \$ 1,603.00 | \$1,3846   |

►PROB 48B (9/00)

Page 3 of \_\_\_\_\_

| Last Name - BURYAKOV   |           |
|--|-----------|
| Necessary Monthly Cash Outflows  | Amount    |
| Rent or Mortgage (List monthly rental payment or mortgage payment.)  | None      |
| Groceries (List the total monthly amount paid for groceries and number of people in your household.) #                                     | None      |
| Utilities (List the monthly amount paid for electric, heating oil/gas, water/sewer, telephone, and basic cable.)                           | Noue      |
| Electric   |           |
| Heating Oil/Gas  |           |
| Water/Sewer  |           |
| Telephone  |           |
| Basic Cable (no premium channels)  |           |
| Transportation (List monthly amount paid for gasoline, motor oil, necessary auto repairs, or the cost of public transportation.)           | NUIC      |
| Insurance (List the monthly amount paid for auto, health, homeowner/rental, and life insurance.)   | None      |
| Auto   |           |
| Health   |           |
| Homeowner/Rental   |           |
| Life   |           |
| Clothing (List the monthly amount actually paid for clothing.)   | None      |
| Loan Payments (List all monthly amounts paid toward verified loans, other than loans to family members, which are non-allowable expenses.) | N'eue     |
| Credit Card Payments (List all monthly credit card or charge card payments.)   | N'ME      |
| Medical (List all monthly payments for necessary medical care or treatment.)   | None      |
| Alimony/Child Support (List all alimony or child support payments made each month.)  | N'CHE     |
| Co-payments (List the total monthly payments made for electronic monitoring and drug and mental health treatment.)                         | NONE      |
| Other (specify) (List all other necessary monthly amounts paid each month not yet reported.) MCC Squadyys Est.                             | \$ 100.00 |
| Other Factors That May Affect Monthly Cash Flow (Describe)   | None      |
| TOTAL  | \$10000   |
| NET MONTHLY CASH FLOW: \$ (CASH INFLOWS LESS NECESSARY CASH OUTFLOWS)  |           |
| MONTHLY CRIMINAL MONETARY PENALTY PAYMENT: S $\mathcal{NUQ}$   |           |
| PROSPECT OF INCREASE IN CASH INFLOWS (Give a general statement of the prospective increase of the value of any cash inflows repu           | orted.)   |
|  |           |
|  |           |
| //   |           |
|  |           |
| Signature 1 thuff Date 5/10/16   |           |

♠PROB 48C (9/00) Page 1 of 2

# REQUEST FOR MONTHLY CASH FLOW STATEMENT FINANCIAL RECORDS DEFENDANT'S FULL NAME DOCKET NUMBER All entries on the Cash Flow Statement must be accompanied by supporting documentation. Provide the probation officer with all records listed below that are applicable to your financial statements, along with your completed Cash Flow Statement by the close of business

#### MONTHLY CASH INFLOWS

#### Salary/Wages

Copy of all W-2 forms submitted with the prior year income tax return. Copy
of all pay-stubs for the most recent one-month period.

#### Cash Advances

Copy of all pay-stubs documenting cash advances.

#### Cash Bonuses

 Copy of all pay-stubs documenting cash bonuses, and copy of related 1099 form

#### Commissions

Copy of all 1099 forms submitted with the prior year income tax return.

#### Rusiness Income

Copy of the past six monthly financial statements of all businesses owned or controlled by the defendant. Also be sure to provide all financial information requested in the "Assets" portion of the "Net Worth Statement" under "Section K, Business Holdings."

#### Interest/Dividends

 Copy of most recent earnings statement from a financial institution (e.g., bank, brokerage firm, etc.). Copy of all 1099-INT forms, reporting annual interest earnings, for the past year.

#### Rental Income

 Copy of lease rental agreement, copy of monthly rental check received, and copy of the deposit on the defendant's monthly bank statement

#### Trust Income

 Copy of the monthly trust income check, copy of the trust agreement, and a copy of the trust income tax return for the prior year.

#### Alimony/Child Support

 Copy of divorce decree, copy of payments received, and statements documenting child support/alimony obligations with payment history

#### Social Security

 Copy of most recent Social Security check and most recent benefits determination letter.

#### Other Government Benefits

 Copy of most recent government subsidy check (e.g., unemployment compensation, or child support/alimony) and most recent benefits determination letter.

### Pensions/Annuities

 Copy of pension/annuity check, copy of most recent pension plan activity statement or annuity statement, and copy of pension plan or annuity contract.

#### Allowances (housing, auto, travel)

 Copy of related pay stub, 1099 form for prior year, and possibly a letter from the employer on company letterhead.

#### Gratuities/Tips

 Copy of current month's pay-stubs, letter from employer estimating monthly gratuities earned, and W-2 form for the prior year.

#### Spouse (Significant Other's) Salary/Wages

Copy of all W-2 forms submitted with the prior year income tax return.
 Copy of all pay-stubs for the most recent one-month period.

#### Other Joint Spousal Income

 Documentation verifying any monthly income jointly earned with the spouse or significant other, (e.g., income from the spouse or significant other or income from a business owned or controlled by the spouse or significant other, that the defendant has a joint ownership interest in, or controls).

#### Income of Others in the Home

Verification of the monthly earnings of all others living in the defendant's household (e.g., all pay-stubs for the prior month, W-2 forms, and 1099 forms for the prior year), paid receipts or canceled checks for necessary monthly household expenditures (e.g., for food, room rental, telephone, transportation, etc.) actually paid by this person on behalf of the defendant.

#### Gifts From Family

 A signed and dated statement from the family member who gave gifts to the defendant during the month, listing the amounts, dates and reasons given, and a copy of the check received, if any.

#### Gifts From Others

 A signed and dated statement from the person(s) who gave gifts to the defendant during the month, listing the amounts, dates and reasons given, and a copy of the check received, if any.

#### Loans From Your Business

Copy of the past six monthly financial statements of all businesses owned
or controlled by the defendant that loaned money to the defendant,
including a detailed schedule of the "Loans To Shareholder/Owner" or "Due
From Shareholder/Owner" general ledger accounts.

#### Mortgage Loans

 Copy of all mortgage checks received during the prior month, 1099 forms submitted with the prior year tax return, and copy of the sales agreement and escrow statement for all mortgage loans owed to the defendant.

#### Other Loaus

 Copy of loan documentation and copy of all loan checks received during the prior month.

#### Other (specify)

Documentation verifying the source of all other monthly cash inflows (not yet disclosed or reported in these financial statements) and copy of all related monthly checks received.

♥PROB 48C (9/00)

Page 2 of 2

# REQUEST FOR MONTHLY CASH FLOW STATEMENT FINANCIAL RECORDS (cont.) NECESSARY MONTHLY CASH OUTFLOWS Credit Card Payments Copy of most current billing statement for all charge accounts (e.g., credit Rent or Mortgage (including taxes) cards, revolving charge cards, and department store cards) and lines of credit Copy of apartment rental lease agreement or home mortgage, most recent (e.g., bank line of credit). mortgage statement, and copy of canceled check. Groceries (# of people) Documentation of medical expenses (e.g., billing statements, payment Grocery receipts with corresponding canceled checks receipts and canceled checks). (if applicable) for the past month. Alimony/Child Support Utilities Copy of divorce decree, canceled checks, and statements documenting child Copy of most current utility bills (e.g., electric, heating oil/gas, water/sewer, support/alimony obligations with payment history. telephone, and basic cable). Co-payments (electronic monitoring, drug/mental health treatment) Transportation Canceled check along with statement from the service provider (if any). Current month gasoline/motor oil receipts and corresponding canceled checks (if applicable), and gasoline credit card statements for the prior month. Other (specify) Insurance Specific receipts, billing statements, and corresponding canceled checks. Copy of most current insurance bills for all types of insurance (auto, health, life, homeowners). Clothing Purchase receipts with corresponding canceled checks. Loan Payments Copy of loan statements (including motor vehicle payment book and lines of credit) for all loans. Also provide a copy of any financial statements submitted to obtain credit in the past three years. ADDITIONAL INSTRUCTIONS: A personal interview has been scheduled for you with: on U.S. Probation Officer Office Location Telephone

№PROB 48D (Rev 9/00)

# DECLARATION OF DEFENDANT OR OFFENDER NET WORTH & CASH FLOW STATEMENTS

| I, Eveny Buryakev, residing at MCC New York, in the city (or county) of New York, in the state of New York,                    |
|--|
| in the city (or county) of New York , in the state of New York ,   |
| have completed the attached Net Worth Statement (Prob. Form 48) or Met Worth Short Form Statement (Prob.                       |
| Form 48EZ) and/or Cash Flow Statement (Prob. Form 48B) that fully describe my financial resources, including a                 |
| complete listing of all assets owned or controlled by me as of this date and any transfers or sales of assets since my arrest. |
| The Cash Flow Statement (Prob. Form 48B) also includes my financial needs and earning ability and the financial needs          |
| and earning ability of my spouse (or significant other) and my dependent(s) living at home.                                    |
|  |
|  |
|  |
|  |
| Net Worth Statement (Total pages, including additional pages)  |
| Net Worth Short Form Statement (Total pages, including additional pages)   |
| Cash Flow Statement (Total pages, including additional pages)  |
|  |
|  |
|  |
| I declare under penalty of perjury that the foregoing is true and correct; or  |
| [M] I deciate midel penalty of perjury that the foregoing is true and correct, of  |
| False statements may result in revocation of supervision, in addition to possible prosecution under the provisions of          |
| 18 U.S.C. § 1001, which carries a term of imprisonment of up to 5 years and a fine of up to \$250,000, or both.                |
|  |
| $\Lambda$  |
|  |
| y E. fly for   |
| (Defendant Signature)  |
|  |
|  |
|  |
| Executed on 1001   |
| Executed on $\frac{2016}{}$ .  |

►PROB 48EZ (Rev. 9/00)

| Last Name | First Name | Middle Name | Social Security<br>Number |
|-----------|------------|-------------|---------------------------|
| Buryakov  | Evyeny     | Eygenievich | Redacted                  |

# Instructions for Completing Net Worth Short Form Statement

Having been convicted in the United States District Court, you are required to prepare and file with the probation officer an affidavit fully describing your financial resources, including a complete listing of all assets you own or control as of this date and any assets you have transferred or sold since your arrest. Amendments were made to 18 U.S.C. §§ 3663(a)(1)(B)(i), 3664(d)(3), and 3664(f)(2), and Rule 32(b)(4)(F) to clarify that the assets owned, jointly owned, or controlled by a defendant, and liabilities are all relevant to the court's decision regarding the ability to pay. Your Net Worth Statement should include assets or debts that are yours alone (I-Individual), assets or debts that are jointly (J-Joint) held by you and a spouse or significant other, assets or debts that are held by a spouse or significant other (S-Spouse or Significant Other) that you enjoy the benefits of or make occasional contributions toward, and assets or debts that are held by a dependent (D-Dependent) that you enjoy the benefits of or make occasional contributions toward. The court may require relating to such other factors as the court deems appropriate (see 18 U.S.C. § 3664(d)(3)).

If you are placed on probation or supervised release (or other types of supervision), you may be periodically required to provide updated information fully describing your financial resources and those of your dependents, as described above, to keep a probation officer informed concerning compliance with any condition of supervision, including the payment of any criminal monetary penalties imposed by the court (see 18 U.S.C. § 3603).

Please complete the Net Worth Short Form Statement in its entirety. You must answer "None" to any item that is not applicable to your financial condition. Attach additional pages if you need more space for any item. All entries must be accompanied by supporting documentation (see Request for Net Worth Statement Financial Records (Prob. 48A)). Sign and date Page 2 (including any attached pages). Also, sign, date, and attach the Declaration of Defendant or Offender Net Worth & Cash Flow Statements (Prob. 48D).

|            | NET WORTH S   | SHORT FORM STATEM  | ENT                                |
|------------|---|--|------------------------------------|
| NO         | E: I = Individual J = Joint S = Spouse/Signi  | ficant Other D = Dependent                               |                                    |
|            |   | ASSETS   |                                    |
|            | de below all cash on hand, bank accounts, securitie<br>ties, motor vehicles, real estate, mortgage loans ow |  |                                    |
| I/J<br>S/D | Type of Asset (e.g., cash, bank account)  | Location of Asset (e.g., bank, including account number) | Fair Market or Actual Value        |
| I          | 25% interest in residential apt   | <u> </u>   | 50,000.00 ilsek                    |
|            | de below all assets transferred or sold since your arr<br>one else is holding on your behalf.               | rest with a cost or fair market value of                 | more than \$500.00, or assets that |
| I/J<br>S/D | Type of Asset   | Date Sold or Transferred                                 | Fair Market or Actual Value        |
| Ţ          | Bank account  | February, 2015   | 20,000.00 Usd. (RSV.)              |
| Ī          | Automobile  |  | 17,000,00                          |
|            |   |  |                                    |
|            | fy below any assets you will liquidate to satisfy any   | criminal monetary penalty that may be                    | e imposed, and/or describe the     |
| L/J<br>S/D | Type of Asso  | et   | Fair Market or Actual Value        |
|            | None  |  |                                    |
|            |   |  |                                    |
|            |   | Y Y A DATE YOUNG   |                                    |
|            |   | LIABILITIES  |                                    |
| I/J        | Type of Debt (e.g., credit card)  | Debt Owed to (e.g., name,                                | Balance Outstanding                |
| S/D        |   | account number)  |                                    |
|            | None  |  |                                    |
|            | •   |  |                                    |
|            |   |  |                                    |

Signature V

Date 04/08/16

♠PROB 48F (09/00)

### REQUEST FOR SELF-EMPLOYMENT RECORDS

DEFENDANT'S FULL NAME

DOCKET NUMBER

In order to verify your self-employment, you are required to furnish all of the records below that are applicable to you and your business to the probation office by the close of business

- Business Bank Statements for all businesses for the past six months (along with canceled checks).
- All Business Income Tax Returns for the past five years (including Corporation Form 1120, S Corporation Form 1120S, Partnership Form 1065, Limited Liability Company Form 1065, or Sole Proprietor Form 1040 Schedule C), along with all accompanying forms and schedules.
- All Annual Financial Statements for the past five years.
- ♦ Most Recent Monthly and Quarterly Financial Statement.
- Quarterly Estimated Tax Payments (Form 1040-ES or Form 8109 for corporations) for the current year.
- Occupational Business License for the current year.
- ◆ Articles of Incorporation for all corporations you own ◆ or have an interest in.
- Partnership Agreement for all partnerships you have an ownership interest in.
- Sales Tax Returns (monthly, quarterly) for the past 12 months.
- Property Tax Returns (inventory, personal property) for the past year.

- ◆ Payroll Tax Returns (quarterly, annually) for the current year, if you presently have or have had employees during the current year.
- ♦ List of Business Customers (to whom your business sells goods or provides services).
- List of Business Vendors (who supply the needed raw materials to produce products or provide services).
- Billing Statements (to collect money from your customers) and Vendor Invoices (to pay bills to your suppliers) for the past six months.
- Real Estate Escrow Statements and Real Estate Leases for all businesses you own or have an interest in.
- ♦ Equipment Purchase Agreements or Leases for all businesses you own or have an interest in.
- Business Insurance Policies for all businesses you own or have an interest in.
- Business Telephone Bills for the past six months for all business telephones.
- ♦ Samples of Business Advertisements (e.g., in print, radio, television, Internet web page, telephone directory listing and ad, etc.).
- ♦ Business Cards, Stationery (e.g., business letterhead).

٠,

PROB 48G (09/00)

| Financial Worksheet  |  |
|--|--|
| Lump Sum Payment Determination   |  |
| ASSETS   |  |
| Cash   |  |
| Cash on Hand (Section I) Bank Accounts (Section A) Securities (Section B) Life Insurance Cash Surrender Value (Section D)  |  |
| Unencumbered Assets (owned free and clear)   |  |
| Real Estate (Section G) Other Assets (Sections I and E) Fair Market Value of Business Holdings (Section K) Fair Market Value of Assets Another is Holding (Section M) Notes and Accounts Receivable (Section C) Motor Vehicles (If no loan balance, Section F) Mortgage Loans Receivable (Section H) Defendant's Interest in Trust Assets (Section J)  TOTAL ASSETS AVAILABLE FOR LUMP SUM PAYMENT CONSIDERATION |  |
|  |  |

►PROB 48 (Rev 9/00)

| Last Name | First Name | Middle Name | Social Security<br>Number |
|-----------|------------|-------------|---------------------------|
|           |            |             |                           |

# **Instructions for Completing Net Worth Statement**

Having been convicted in the United States District Court, you are required to prepare and file with the probation officer an affidavit fully describing your financial resources, including a complete listing of all assets you own or control as of this date and any assets you have transferred or sold since your arrest. Amendments were made to 18 U.S.C. §§ 3663(a)(1)(B)(i), 3664(d)(3), and 3664(f)(2), and Rule 32(b)(4)(F) to clarify that the assets owned, jointly owned, or controlled by a defendant, and liabilities are all relevant to the court's decision regarding the ability to pay. Your Net Worth Statement should include assets or debts that are yours alone (I-Individual), assets or debts that are jointly (J-Joint) held by you and a spouse or significant other, assets or debts that are held by a spouse or significant other (S-Spouse or Significant Other) that you enjoy the benefits of or make occasional contributions toward, and assets or debts that are held by a dependent (D-Dependent) that you enjoy the benefits of or make occasional contributions toward.

If you are placed on probation or supervised release (or other types of supervision), you may be periodically required to provide updated information fully describing your financial resources and those of your dependents, as described above, to keep a probation officer informed concerning compliance with any condition of supervision, including the payment of any criminal monetary penalties imposed by the court (see 18 U.S.C. § 3603).

Please complete the Net Worth Statement in its entirety. You must answer "None" to any item that is not applicable to your financial condition. Attach additional pages if you need more space for any item. All entries must be accompanied by supporting documentation (see Request for Net Worth Statement Financial Records (Prob. 48A)). Initial and date each page (including any attached pages). Also, sign, date, and attach the Declaration of Defendant or Offender Net Worth & Cash Flow Statements (Prob. 48D).

Page 2 of \_\_\_ PROB 48 (Rev. 9/00) Last Name -NET WORTH STATEMENT NOTE: I = Individual J = Joint S = Spouse/Significant Other D = Dependent ASSETS BANK ACCOUNTS (Include all personal and businesses checking and savings accounts, credit unions, money markets, certificates of deposit, IRA and KEOGH accounts, Thrift Savings, 401K, etc.) Personal or Type of Account Name of Institution Address Balance S/D Account Number Commercial Section SECURITIES (Include all stocks in public corporations, stocks in businesses you own or have an interest in, bonds, mutual funds, U.S. Government securities, etc.) Fair Market I/J Number of Name and Kind of Security Location of Security S/D Units Value Section E MONEY OWED TO YOU BY OTHERS (Include all money owed to you by any person or entity.) Is Debt IJ Name and Address of Amount Reason Owed **Date Money** Relationship Monthly Debtor to Debtor Collectible? Owed to You to You Payment S/D Loaned (if any) or Date Full Payment Expected

Section (

| Initials X | Date |
|------------|------|
|            |      |

**⇔PROB** 48 Page 3 of \_\_\_\_\_ (Rev. 9/00) Last Name -LIFE INSURANCE (Include type of policy [whole life, variable, or term], face amount [the stated amount of coverage] and cash surrender value [the value of the investment portion of a whole life or variable policy.]) Amount IJ Name and Address of Policy Type of Cash Face Amount Company and Name S/D Number Policy Amount Surrender Borrowed You Can of Beneficiary Value Borrow Scetion I 485 SAFE DEPOSIT BOXES OR STORAGE SPACE FACILITY (Include all safe deposit boxes or storage space you rent or places you have access to in which others are holding assets or items belonging to you.) I/J Name and Address **Box Number** Fair Market Value Contents of Box or Facility Location S/D or Space Section E MOTOR VEHICLES (Include all cars, trucks, mobile homes, motorcycles, all terrain vehicles, boats, airplanes, etc.) Loan/Lease L/J Year, Make & License Mileage Date Loan/Lease Fair Market Monthly Number/Vehicle Will be Paid Off Balance Payment Value S/D Identification Number (if any) or Ends Section REAL ESTATE (Include property, parcels, lots, timeshares, and developed land with buildings.) Į/J Real Estate Address Purchase Purchase Mortgage Date Monthly Fair Market (include county and state)/ Value S/D Date Price Balance Mortgage Payment Mortgage Company Will be Paid (if any) or Lien Holder Off tion MORTGAGE LOANS OWED TO YOU (Include name, address, and relationship [if any] to the mortgagee [the party that bought the real estate you sold and is making payments to you].) Mortgagee (name & address)/ Is Debt IJ Mortgage Date Mortgage Balloon Monthly Relationship to Mortgagee Will be Paid Payment? Collectible? S/D Balance Payment If Yes, Date? Off

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PROB 48 (Rev. 9/00) Page 4 of \_\_\_\_

|            | rights, patents, etc.)  |                           |                         | T                  | T                     | · · · · · · · · · · · · · · · · · · · |                         |
|------------|---|---------------------------|-------------------------|--------------------|-----------------------|---------------------------------------|-------------------------|
| S/D        | Description   | Loan<br>Balanc<br>(if any | e Will be Paid          | Monthly<br>Payment | Where is<br>Locate    |                                       | Fair Market<br>Value    |
|            |   |                           |                         |                    |                       |                                       |                         |
| -          |   |                           |                         |                    |                       |                                       |                         |
| ection I   |   |                           |                         |                    |                       |                                       |                         |
|            |   |                           | _                       |                    |                       |                                       |                         |
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|            |   |                           |                         | L                  |                       |                                       |                         |
|            | CIPATED ASSETS (Inch  |                           |                         |                    |                       | isation or damag                      | ges, profit sha         |
| I/J        | on plans, inheritance, wills, Amount Received or              | Date                      | Reason You Ex           |                    | <del>,</del>          | ddress of Perso                       | on or Compa             |
| S/D        | Expected to Receive   | Expected to               |                         | •                  | That Can Ver          | ify This (e.g., a                     | ttorney, finas          |
| -          |   | Receive                   |                         |                    | ET .                  | istitution, execu                     | utor)                   |
|            |   |                           |                         |                    |                       |                                       |                         |
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| -          |   |                           |                         | -                  |                       |                                       |                         |
|            |   |                           |                         |                    |                       |                                       |                         |
| TRUS       | T ASSETS (Include all tru                                     | sts in which you          | are a grantor or donor  | [the person who    | establishes the       | trust], the truste                    | e or fiduciary          |
| I/J        | Name of Trust/  | Value of                  |                         |                    |                       |                                       |                         |
| S/D        | Taxpayer ID#  | Trust                     | Your Annual Incom       | e From Trust       | Your                  | Interest in Tru                       | st Assets               |
|            |   |                           |                         |                    |                       |                                       |                         |
|            |   |                           |                         |                    |                       |                                       |                         |
|            |   |                           |                         |                    |                       | <del></del>                           |                         |
| RUSIN      | ÆSS HOLDINGS (Includ  | n all husinesses in       | which you have an o     | wnership interes   | st or with which      | you had an affili                     | iation within           |
| the last   | three years; e.g., self-empl<br>additional pages, if necessar | oyed sole proprie         |                         |                    |                       |                                       | olete Section I         |
| I/J<br>S/D | Name and Address<br>of Business/                              | Type of Business          | Industry of<br>Business | Date<br>Business   | Capital<br>Investment | Your<br>Ownership                     | Sale Price<br>Fair Mari |
| JI         | Taxpayer I.D.#  | Entity                    | Dustiless               | Started            | to Start              | Interest                              | Value of Y              |
|            |   |                           |                         |                    |                       | Percentage                            | Interest                |
|            |   |                           |                         |                    |                       | !                                     |                         |
|            |   |                           | 1 1                     |                    |                       | i e                                   | t                       |
| tion I     |   |                           |                         |                    |                       |                                       |                         |
| etion K    |   |                           |                         |                    |                       |                                       |                         |
| etion K    |   |                           |                         |                    |                       |                                       |                         |
| tion K     |   |                           |                         |                    |                       |                                       |                         |

| Initials K | Date |  |
|------------|------|--|
| muuais N   | Date |  |

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| Last         | Nam              | e -   |                         |   |                                   |   |   |
|--------------|------------------|---|-------------------------|---|-----------------------------------|---|---|
|              | INC              | OME TAX RETURNS   |                         |   |                                   |   |   |
|              |                  | Type of Income Tax Return   | Filed                   | Last Fil                                      | ing Year                          | You Will Subn                                 | Income Tax Returns  it to the Probation  Afficer  |
|              | Indiv            | idual (Form 1040)   |                         |   |                                   |   |   |
| eral<br>E/Se | Partn<br>ctiparh | ership/Limited Liability Company<br>n 1065)                       |                         |   |                                   |   |   |
|              | Согра            | oration (Form 1120)   |                         |   |                                   |   |   |
|              | S Cor            | poration (Form 1120S)   |                         |   |                                   |   | ······································            |
|              | of mo            | SFER OF ASSETS (Include any re than \$500.00. Also list any asset | ets that someone        | e transferred or sole<br>e else is holding on | d since the date of your behalf.) | your arrest with a cost                       | or fair market value                              |
| ができる。        | I/J<br>S/D       | Description of Asset/<br>Reason<br>Transferred/Sold               | Date of<br>Transfer/Sal | Original<br>le Cost                           | Amount You<br>Received, if<br>Any | Name of Purchaser or Person Holding the Asset | Sale Price or<br>Fair Market Value<br>at Transfer |
|              |                  |   |                         |   |                                   |   |   |
|              |                  |   |                         |   |                                   |   |   |
|              |                  |   |                         |   |                                   |   |   |
| Se           | ction N          | [   |                         |   |                                   |   |   |
|              |                  |   |                         |   |                                   |   |   |
|              |                  |   |                         |   |                                   |   |   |
|              |                  |   |                         |   |                                   |   |   |
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|              |                  | OR OR OTHER PROPERTY OF THE                                       | I DEDEEDS &             | <u> </u>                                      |                                   |   |   |
|              |                  | CS OF SHAREHOLDERS OR P<br>hip interest.)                         | ARINERS (III            | clude all sharehold                           | ers, officers, and/o              | r partners, indicating (                      |   |
|              |                  | Name of Business  |                         | Names   | of Shareholders/P                 | artners                                       | Ownership Interest<br>Percentage                  |
|              |                  |   |                         |   |                                   |   |   |
|              | ·                |   |                         |   |                                   |   |   |
| Se           | etion N          |   |                         |   | ····                              |   |   |
|              |                  |   |                         |   |                                   |   |   |
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| imposed.)  Asset Description | Estimated Value          | Date You Will                         | Current Location of Asset                       |
|------------------------------|--------------------------|---------------------------------------|---|
| Asset Description            | of Asset                 | Liquidate                             | (if real property, county and state)            |
|                              |                          |                                       |   |
|                              |                          |                                       |   |
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| *                            |                          |                                       |   |
|                              | 1                        |                                       |   |
| PROSPECT OF INCREASE         | IN ASSETS (Give a gene   | eral statement of the prospe          | ective increase of the value of any asset you o |
| THOUSE DOT OF ENGLISHED      | 21.1000000 (0.10 2 50.10 | nat statement of the prospe           | Serve increase of the value of any asset you o  |
|                              |                          |                                       |   |
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| Initials 🛠 | Date |  |
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**№**PROB 48 Page 7 of \_\_\_\_\_ (Rev. 9/00) Last Name -LIABILITIES CHARGE ACCOUNTS AND LINES OF CREDIT (Include all bank credit cards, lines of credit, revolving charge accounts, etc.) I/J Type of Name and Address Credit Amount Credit Minimum S/D Account of Creditor Available Limit Owed Monthly or Card Payment Section OTHER DEBTS (Include mortgage loans, notes payable, delinquent taxes, and child support.) I/J Owed To Address Relationship Monthly Amount Reason S/D (if any) Owed Owed Payment Section I THE STATE PARTY TO CIVIL SUIT (Include any civil lawsuits you have ever been a party to.) I/J Name of Plaintiff Court of Jurisdiction Date of Suit Date of Case Judgment Amount/ S/D in the Case and County Number Filed Judgment Unpaid Balance Section ( BANKRUPTCY FILINGS (Include information requested for any Chapter 7, 11, or 13 bankruptcy filings you have ever been a party to as an individual or as a business entity. I/JType of Bankruptcy Bankruptcy Bankruptcy Court County and State of Date Filed Date of S/D (Voluntary or Involuntary)/ Case of Jurisdiction Discharge Discharge Name and Address of Trustee Number Se

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| Signature Date |  |
|----------------|--|
|----------------|--|

►PROB 48A (9/00)

Page I of 2

# REQUEST FOR NET WORTH STATEMENT FINANCIAL RECORDS DEFENDANT'S FULL NAME DOCKET NUMBER All entries on the Net Worth Statement must be accompanied by supporting documentation. Provide the probation officer with all records listed below that are applicable to your financial statements, along with your completed Net Worth Statement by the close of business ...

#### **ASSETS**

#### Section A - Bank Accounts

Most recent bank account statements (e.g., checking, savings, credit union, money market, brokerage, Certificate of Deposit, or savings bonds) for a three-month period, along with canceled checks.

#### Section B - Securities

 Most recent securities account statements (e.g., brokerage, annuities, life insurance, IRA, KEOGH, 401K, or thrift savings account) for a three-month period.

#### Section C - Notes & Accounts Receivable

Copy of signed note receivable.

#### Section D - Life Insurance

 Copy of all life insurance policies (e.g., whole life, variable life, term).

#### Section E - Safe Deposit Boxes or Storage Facilities

 Copy of most recent rental invoice for all safe deposit boxes or storage facility rentals within the past year, including receipts or verification of content value.

#### Section F - Motor Vehicles

♦ Copy of vehicle registration and title for all vehicles owned or leased.

#### Section G - Real Estate

 Copy of purchase agreement, deeds, and escrow statement for all real property.

## Section H - Mortgage Loans Owed To You

 Copy of the sales agreement and escrow statement for all real property.

#### Section I - Other Assets

 Copy of purchase invoice and appraisal (if already previously obtained), and documentation to verify the fair market value of the asset.

#### Section J - Anticipated Assets

Copy of documentation to verify future receipt of anticipated asset, (c.g., claim or lawsuit filings, profit sharing plan and current statement, pension plan and current statement, inheritance documents, copy of all trusts, trust income tax returns), and most recent accounting reflecting the value of your interest and income from the trust.

#### Section K - Business Holdings

♦ In addition to providing the information requested in Section K and completing Section N, provide copies of all income tax returns for each business you had an ownership interest in (e.g., shareholder, partner, proprietor) or an affiliation with (e.g., officer, director, board member, agent, associate) within the last five years. Also provide all financial statements for each business, prepared by you or your accountant, within the past five years.

#### **Business Accounts Receivable**

 Copy of current month's billing statements that verify business accounts receivable.

#### **Business Accounts Payable**

 Copy of current month's vendor invoices that verify business accounts payable.

#### Section L - Income Tax Returns

Copy of the five most recent years' income tax returns filed for: Individual (Form 1040), Partnership (Form 1065), Corporation (Form 1120), S Corporation (Form 1120S), and Limited Liability Company (Form 1065). Be sure to include all related schedules and forms. Provide a written explanation for any returns not filed.

# Section M - Transfer of Assets

Copy of the bill of sale, documentation of funds received from sale (e.g., a personal or business check, cashiers check or money order), copy of vehicle registration and title of sold vehicle, and escrow closing statements for any real estate sold since the date of your arrest.

#### Section N - Names of Shareholders or Partners

 Copy of Articles of Incorporation for all corporations you own or have an interest in. Copy of partnership agreement for all partnerships you have an ownership interest in. № PROB 48A (9/00) Page 2 of 2

| REQUEST FOR NET WORTH STATEMENT FINANCIAL RECORDS (cont.)  |                         |  |  |  |
|--|-------------------------|--|--|--|
| LIABILITIES  | OTHER RECORDS REQUESTED |  |  |  |
| Section A - Charge Accounts  |                         |  |  |  |
| <ul> <li>Copy of most current billing statement for all charge accounts (e.g.,<br/>credit cards, revolving charge cards, and department store cards) and<br/>lines of credit (e.g., bank line of credit).</li> </ul> |                         |  |  |  |
| Section B - Other Debts  |                         |  |  |  |
| Copy of all notes payable, mortgage loans, current statement of<br>delinquent taxes due, and statements documenting child support/<br>alimony obligations and payment history.                                       |                         |  |  |  |
| Section C - Party to Civil Suit  |                         |  |  |  |
| ♦ Copy of all civil suit filings and judgments.  |                         |  |  |  |
| Section D - Bankruptcy Filings   |                         |  |  |  |
| <ul> <li>Copy of all bankruptcy filings including petition, financial<br/>statements submitted, final judgment and order of discharge.</li> </ul>  |                         |  |  |  |
| A personal interview has been scheduled for you with:  |                         |  |  |  |
| U.S. Probation Officer   | Date                    |  |  |  |
|  |                         |  |  |  |
| at Office Location   |                         |  |  |  |
| Time   |                         |  |  |  |
| Telephone  |                         |  |  |  |
|  |                         |  |  |  |

PROB 48D (Rev 9/00)

# DECLARATION OF DEFENDANT OR OFFENDER NET WORTH & CASH FLOW STATEMENTS

| I, Evgeny Buryakov in the city (or county) of New York     | , residing at MCC New York .  |
|--|---|
|  |   |
| ·  | (Prob. Form 48) or [V] Net Worth Short Form Statement (Prob.          |
| Form 48EZ) and/or Cash Flow Statement (Prob. For           | rm 48B) that fully describe my financial resources, including a       |
| complete listing of all assets owned or controlled by me   | as of this date and any transfers or sales of assets since my arrest. |
| The Cash Flow Statement (Prob. Form 48B) also include      | s my financial needs and earning ability and the financial needs      |
| and earning ability of my spouse (or significant other) an | d my dependent(s) living at home.                                     |
|  |   |
|  |   |
|  |   |
|  |   |
| Net Worth Statement (Total pages, including additional p   | ages)   |
| Net Worth Short Form Statement (Total pages, including     | additional pages)   |
| Cash Flow Statement (Total pages, including additional p   | ages)   |
|  |   |
|  |   |
|  |   |
|  |   |
| I declare under penalty of perjury that the foregoing i    | s true and correct; or  |
| False statements may result in revocation of supervisi     | ion, in addition to possible prosecution under the provisions of      |
|  | ent of up to 5 years and a fine of up to \$250,000, or both.          |
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|  | (Defeedent Signature)   |
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| Executed on $\frac{20/6}{}$ .                              |   |
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◆PROB 48EZ (Rev. 9/00)

| Last Name | First Name | Middle Name | Social Security Number |
|-----------|------------|-------------|------------------------|
| BURYAKON  | ENCENY     |             | Redacted               |

# Instructions for Completing Net Worth Short Form Statement

Having been convicted in the United States District Court, you are required to prepare and file with the probation officer an affidavit fully describing your financial resources, including a complete listing of all assets you own or control as of this date and any assets you have transferred or sold since your arrest. Amendments were made to 18 U.S.C. §§ 3663(a)(1)(B)(i), 3664(d)(3), and 3664(f)(2), and Rule 32(b)(4)(F) to clarify that the assets owned, jointly owned, or controlled by a defendant, and liabilities are all relevant to the court's decision regarding the ability to pay. Your Net Worth Statement should include assets or debts that are yours alone (I-Individual), assets or debts that are jointly (J-Joint) held by you and a spouse or significant other, assets or debts that are held by a spouse or significant other (S-Spouse or Significant Other) that you enjoy the benefits of or make occasional contributions toward, and assets or debts that are held by a dependent (D-Dependent) that you enjoy the benefits of or make occasional contributions toward. The court may require relating to such other factors as the court deems appropriate (see 18 U.S.C. § 3664(d)(3)).

If you are placed on probation or supervised release (or other types of supervision), you may be periodically required to provide updated information fully describing your financial resources and those of your dependents, as described above, to keep a probation officer informed concerning compliance with any condition of supervision, including the payment of any criminal monetary penalties imposed by the court (see 18 U.S.C. § 3603).

Please complete the Net Worth Short Form Statement in its entirety. You must answer "None" to any item that is not applicable to your financial condition. Attach additional pages if you need more space for any item. All entries must be accompanied by supporting documentation (see Request for Net Worth Statement Financial Records (Prob. 48A)). Sign and date Page 2 (including any attached pages). Also, sign, date, and attach the Declaration of Defendant or Offender Net Worth & Cash Flow Statements (Prob. 48D).

►PROB 48EZ (Rev. 9/00) Page 2

|            | NET WORTH  | SHORT FORM STATEM                           | ENT                                |
|------------|--|---|------------------------------------|
| NOTE: I    | I = Individual   | ificant Other D = Dependent                 |                                    |
|            |  | ASSETS                                      |                                    |
|            | elow all cash on hand, bank accounts, securiti<br>motor vehicles, real estate, mortgage loans ov |   | •                                  |
| I/J        | Type of Asset  | Location of Asset (e.g., bank,              | Fair Market or Actual Value        |
| S/D        | (e.g., cash, bank account)   | including account number)                   |                                    |
|            |  |   |                                    |
|            | elow all assets transferred or sold since your a<br>else is holding on your behalf.              | rrest with a cost or fair market value of r | more than \$500.00, or assets that |
| I/J<br>S/D | Type of Asset  | Date Sold or Transferred                    | Fair Market or Actual Value        |
|            |  |   |                                    |
|            | clow any assets you will liquidate to satisfy an f increase in assets.                           | y criminal monetary penalty that may be     | imposed, and/or describe the       |
| I/J<br>S/D | Type of As   | set   | Fair Market or Actual Value        |
|            |  |   |                                    |
|            |  |   |                                    |
|            |  |   |                                    |
| noluda hal | low all charge accounts and lines of credit, mo  | LIABILITIES                                 | and bankruptou filings             |
| 1/J<br>S/D | Type of Debt (e.g., credit card)   | Debt Owed to (e.g., name, account number)   | Balance Outstanding                |
|            |  |   |                                    |
|            |  |   |                                    |
|            |  |   |                                    |
|            |  |   |                                    |
|            |  |   |                                    |
|            |  |   |                                    |

| 1           |      |
|-------------|------|
| Signature 💢 | Date |

№PROB 48F (09/00)

#### REQUEST FOR SELF-EMPLOYMENT RECORDS

DEFENDANT'S FULL NAME

DOCKET NUMBER

In order to verify your self-employment, you are required to furnish all of the records below that are applicable to you and your business to the probation office by the close of business

- Business Bank Statements for all businesses for the past six months (along with canceled checks).
- All Business Income Tax Returns for the past five years (including Corporation Form 1120, S Corporation Form 1120S, Partnership Form 1065, Limited Liability Company Form 1065, or Sole Proprietor Form 1040 Schedule C), along with all accompanying forms and schedules.
- All Annual Financial Statements for the past five years.
- Most Recent Monthly and Quarterly Financial Statement.
- Quarterly Estimated Tax Payments (Form 1040-ES or Form 8109 for corporations) for the current year.
- ♦ Occupational Business License for the current year.
- ◆ Articles of Incorporation for all corporations you own or have an interest in.
- ♦ Partnership Agreement for all partnerships you have an ownership interest in.
- ◆ Sales Tax Returns (monthly, quarterly) for the past 12 months.
- Property Tax Returns (inventory, personal property) for the past year.

- Payroll Tax Returns (quarterly, annually) for the current year, if you presently have or have had employees during the current year.
- List of Business Customers (to whom your business sells goods or provides services).
- List of Business Vendors (who supply the needed raw materials to produce products or provide services).
- Billing Statements (to collect money from your customers) and Vendor Invoices (to pay bills to your suppliers) for the past six months.
- ♦ Real Estate Escrow Statements and Real Estate
  Leases for all businesses you own or have an interest
  in
- Equipment Purchase Agreements or Leases for all businesses you own or have an interest in.
- Business Insurance Policies for all businesses you own or have an interest in.
- Business Telephone Bills for the past six months for all business telephones.
- ♦ Samples of Business Advertisements (e.g., in print, radio, television, Internet web page, telephone directory listing and ad, etc.).
- ♦ Business Cards, Stationery (e.g., business letterhead).

PROB 48G (09/00)

| Financial Worksheet  |  |  |  |  |
|--|--|--|--|--|
| Lump Sum Payment Determination   |  |  |  |  |
| ASSETS   |  |  |  |  |
| Cash   |  |  |  |  |
| Cash on Hand (Section I)  Bank Accounts (Section A)  Securities (Section B)  Life Insurance Cash Surrender Value (Section D)   |  |  |  |  |
| Unencumbered Assets (owned free and clear)   |  |  |  |  |
| Real Estate (Section G) Other Assets (Sections I and E) Fair Market Value of Business Holdings (Section K) Fair Market Value of Assets Another is Holding (Section M) Notes and Accounts Receivable (Section C) Motor Vehicles (If no loan balance, Section F) Mortgage Loans Receivable (Section H) Defendant's Interest in Trust Assets (Section J)  TOTAL ASSETS AVAILABLE FOR LUMP SUM PAYMENT CONSIDERATION |  |  |  |  |
|  |  |  |  |  |

№PROB 48B (9/00)

| Last Name | First Name | Middle Name | Social Security Number |
|-----------|------------|-------------|------------------------|
|           |            |             |                        |

# Instructions for Completing Monthly Cash Flow Statement

Having been convicted in the United States District Court, you are required to prepare and file with the probation officer a statement fully describing your financial resources, including a complete listing of all monthly cash inflows and outflows.

If you are placed on probation or supervised release (or other types of supervision), you may be periodically required to provide updated information fully describing your financial resources and those of your spouse, significant others, or dependents, as described above, to keep a probation officer informed concerning compliance with any condition of supervision, including the payment of any criminal monetary penalties imposed by the court (see 18 U.S.C. § 3603).

Amendments were made to 18 U.S.C. §§ 3663 (a)(1)(B)(i), 3664(d)(3), and 3664(f)(2), and Rule 32(b)(4)(F) to clarify that the assets owned, jointly owned, or controlled by a defendant; liabilities, and the financial needs and earning ability of a defendant and a defendant's dependents are all relevant to the court's decision regarding a defendant's ability to pay. Your Cash Flow Statement should include assets or debts that are yours alone (I-Individual), assets or debts that are jointly (J-Joint) held by you and a spouse or significant other, assets or debts that are held by a spouse or significant other (S-Spouse or Significant Other) that you enjoy the benefits of or make occasional contributions toward, and assets or debts that are held by a dependent (D-Dependent) living in your home that you enjoy the benefits of or make occasional contributions toward.

Please complete the Monthly Cash Flow Statement in its entirety. You must answer "None" to any item that is not applicable to your financial condition. Attach additional pages if you need more space for any item. All entries must be accompanied by supporting documentation (see Request for Cash Flow Statement Financial Records (Prob. 48C)). Initial and date each page (including any attached pages) and sign and date the last page of the Cash Flow Statement.

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| Last Name -  |       |       |  |  |
|--|-------|-------|--|--|
| MONTHLY CASH FLOW STATEME  | NT    |       |  |  |
| Monthly Cash Inflows   |       |       |  |  |
| Defendant  | Gross | Net   |  |  |
| Your Salary/Wages (List both monthly gross earnings and take-home pay after payroll deductions.)   |       |       |  |  |
| Your Cash Advances (List all payroll advances or other advances from work.)  |       |       |  |  |
| Your Cash Bonuses (List all payments from work in addition to your salary that are not an advance.)  |       |       |  |  |
| Commissions (List all non-employee earnings as an independent contractor.)   |       |       |  |  |
| Business Income (List both monthly gross income and not income after deducting expenses.)  |       |       |  |  |
| Interest (List all interest earned each month.)  |       |       |  |  |
| Dividends (List all dividends carned each month.)  |       |       |  |  |
| Rental Income (List all monthly income received from real estate properties owned.)  |       |       |  |  |
| Trust Income (List all trust income earned each month.)  |       | ***** |  |  |
| Alimony/Child Support (List all alimony or child support payments received each month.)  |       | ****  |  |  |
| Social Security (List all payments received from Social Security.)   |       |       |  |  |
| Other Government Benefits (List all amounts received from the government not yet reported (e.g., Aid to Families with Dependent Children.)   |       |       |  |  |
| Pensions/Annuities (List all funds received from pensions and annuities each month.)   |       |       |  |  |
| Allowances-Housing/Auto/Travel (List all funds received from housing allowances, auto allowances, travel allowances, and any other kind of allowance.)   |       |       |  |  |
| Gratuities/Tips (List all gratuities and tips received each month from any and all sources.)   |       |       |  |  |
| Spouse/Significant Other Salary/Wages (List all gross and net monthly salary and wages received by your spouse or significant other.)  |       |       |  |  |
| Other Joint Spousal Income (List any monthly income jointly earned with your spouse or significant other [e.g., any income from spouse or income from a business owned or operated by the spouse that you have a joint ownership interest in or control]). |       |       |  |  |
| (ncome of Other In-House (List all monthly income of others living in the household or the monthly amount actually paid for household bills by these persons.)   |       |       |  |  |
| Gifts from Family (List all amounts received as gifts from family members each month.)   |       |       |  |  |
| Gifts from Others (List all gifts received from any sources not yet reported.)   |       |       |  |  |
| oans from Your Business (List all loan amounts received each month from all businesses owned or controlled by you.)  |       |       |  |  |
| Mortgage Loans (List all amounts received each month from mortgage loans owed to you.)   |       |       |  |  |
| Other Loans (List all other loan amounts received each month not yet reported.)  |       |       |  |  |
| Other (specify) (List all other amounts received each month not yet reported.)   |       |       |  |  |
| OTALS  |       |       |  |  |

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| Last Name -  |        |
|--|--------|
| Necessary Monthly Cash Outflows  |        |
|  | Amount |
| Rent or Mortgage (List monthly rental payment or mortgage payment.)  |        |
| Groceries (List the total monthly amount paid for groceries and number of people in your household.) #                                     |        |
| Utilities (List the monthly amount paid for electric, heating oil/gas, water/sewer, telephone, and basic cable.)                           |        |
| Electric   |        |
| Heating Oil/Gas  |        |
| Water/Sewer  |        |
| Telephone  |        |
| Basic Cable (no premium channels)  |        |
| Transportation (List monthly amount paid for gasoline, motor oil, necessary auto repairs, or the cost of public transportation.)           |        |
| Insurance (List the monthly amount paid for auto, health, homeowner/rental, and life insurance.)   |        |
| Auto   |        |
| Health   |        |
| Homeowner/Rental   |        |
| Life   |        |
| Clothing (List the monthly amount actually paid for clothing.)   |        |
| Loan Payments (List all monthly amounts paid toward verified loans, other than loans to family members, which are non-allowable expenses.) |        |
| Credit Card Payments (List all monthly credit card or charge card payments.)   |        |
| Medical (List all monthly payments for necessary medical care or treatment.)   |        |
| Alimony/Child Support (List all alimony or child support payments made each month.)  |        |
| Co-payments (List the total monthly payments made for electronic monitoring and drug and mental health treatment.)                         |        |
| Other (specify) (List all other necessary monthly amounts paid each month not yet reported.)   |        |
| Other Factors That May Affect Monthly Cash Flow (Describe)   |        |
| TOTAL  |        |
| NET MONTHLY CASH FLOW: \$ (CASH INFLOWS LESS NECESSARY CASH OUTFLOWS)  |        |
| MONTHLY CRIMINAL MONETARY PENALTY PAYMENT: \$  |        |
| PROSPECT OF INCREASE IN CASH INFLOWS (Give a general statement of the prospective increase of the value of any cash inflows report         | ed.)   |
|  |        |
|  |        |
|  |        |
|  |        |

Date \_\_\_\_

Signature \(\frac{1}{2}\)

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### REQUEST FOR MONTHLY CASH FLOW STATEMENT FINANCIAL RECORDS

DEFENDANT'S FULL NAME

DOCKET NUMBER

All entries on the Cash Flow Statement must be accompanied by supporting documentation. Provide the probation officer with all records listed

below that are applicable to your financial statements, along with your completed Cash Flow Statement by the close of business

#### MONTHLY CASH INFLOWS

#### Salary/Wages

Copy of all W-2 forms submitted with the prior year income tax return. Copy
of all pay-stubs for the most recent one-month period.

#### Cash Advances

Copy of all pay-stubs documenting cash advances.

#### Cash Bonuses

 Copy of all pay-stubs documenting cash bonuses, and copy of related 1099 form.

#### Commissions

Copy of all 1099 forms submitted with the prior year income tax return.

#### Business Income

 Copy of the past six monthly financial statements of all businesses owned or controlled by the defendant. Also be sure to provide all financial information requested in the "Assets" portion of the "Net Worth Statement" under "Section K, Business Holdings."

#### Interest/Dividends

 Copy of most recent earnings statement from a financial institution (e.g., bank, brokerage firm, etc.). Copy of all 1099-INT forms, reporting annual interest carnings, for the past year.

#### Rental Income

 Copy of lease rental agreement, copy of monthly rental check received, and copy of the deposit on the defendant's monthly bank statement.

#### Trust Income

 Copy of the monthly trust income check, copy of the trust agreement, and a copy of the trust income tax return for the prior year.

#### Alimony/Child Support

 Copy of divorce decree, copy of payments received, and statements documenting child support/alimony obligations with payment history.

#### Social Security

 Copy of most recent Social Security check and most recent benefits determination letter.

#### Other Government Benefits

 Copy of most recent government subsidy check (e.g., unemployment compensation, or child support/alimony) and most recent benefits determination letter.

#### Pensions/Annuities

 Copy of pension/annuity check, copy of most recent pension plan activity statement or annuity statement, and copy of pension plan or annuity contract.

#### Allowances (housing, auto, travel)

 Copy of related pay stub, 1099 form for prior year, and possibly a letter from the employer on company letterhead.

#### Gratuities/Tips

 Copy of current month's pay-stubs, letter from employer estimating monthly gratuities earned, and W-2 form for the prior year.

#### Spouse (Significant Other's) Salary/Wages

Copy of all W-2 forms submitted with the prior year income tax return.
 Copy of all pay-stubs for the most recent one-month period.

#### Other Joint Spousal Incom-

 Documentation verifying any monthly income jointly earned with the spouse or significant other, (e.g., income from the spouse or significant other or income from a business owned or controlled by the spouse or significant other, that the defendant has a joint ownership interest in, or controls).

#### Income of Others in the Home

Verification of the monthly earnings of all others living in the defendant's household (e.g., all pay-stubs for the prior month. W-2 forms, and 1099 forms for the prior year), paid receipts or canceled checks for necessary monthly household expenditures (e.g., for food, room rental, telephone, transportation, etc.) actually paid by this person on behalf of the defendant.

#### Gifts From Family

 A signed and dated statement from the family member who gave gifts to the defendant during the month, listing the amounts, dates and reasons given, and a copy of the check received, if any.

#### Gifts From Others

 A signed and dated statement from the person(s) who gave gifts to the defendant during the month, listing the amounts, dates and reasons given, and a copy of the check received, if any.

#### Loans From Your Business

Copy of the past six monthly financial statements of all businesses owned or controlled by the defendant that loaned money to the defendant, including a detailed schedule of the "Loans To Shareholder/Owner" or "Due From Shareholder/Owner" general ledger accounts.

# Mortgage Loans

Copy of all mortgage checks received during the prior month, 1099 forms submitted with the prior year tax return, and copy of the sales agreement and escrow statement for all mortgage loans owed to the defendant.

#### Other Loans

 Copy of loan documentation and copy of all loan checks received during the prior month.

#### Other (specify)

Documentation verifying the source of all other monthly cash inflows (not yet disclosed or reported in these financial statements) and copy of all related monthly checks received

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| REQUEST FOR MONTHLY CASH FLOW S   | TATEMENT FINANCIAL RECORDS (cont.)  |  |
|---|---|--|
| NECESSARY MONTHLY CASH OUTFLOWS   | Credit Card Payments  |  |
| Rent or Mortgage (including taxes)  Copy of apartment rental lease agreement or home mortgage, most recent mortgage statement, and copy of canceled check.  Groceries (# of people)   | Copy of most current billing statement for all charge accounts (e.g., credit cards, revolving charge cards, and department store cards) and lines of credit (e.g., bank line of credit).  Medical   |  |
| <ul> <li>♦ Grocery receipts with corresponding canceled checks         (if applicable) for the past month.</li> <li>Utilities</li> <li>♦ Copy of most current utility bills (e.g., electric, heating oil/gas, water/sewer, telephone, and basic cable).</li> <li>Transportation</li> <li>♦ Current month gasoline/motor oil receipts and corresponding canceled checks (if applicable), and gasoline credit card statements for the prior month.</li> <li>Insurance</li> <li>♦ Copy of most current insurance bills for all types of insurance (auto, health, life, homeowners).</li> <li>Clotbing</li> <li>♦ Purchase receipts with corresponding canceled checks.</li> <li>Loan Payments</li> </ul> | <ul> <li>Documentation of medical expenses (e.g., billing statements, payment receipts and canceled checks).</li> <li>Alimony/Child Support</li> <li>Copy of divorce decree, canceled checks, and statements documenting child support/alimony obligations with payment history.</li> <li>Co-payments (electronic monitoring, drug/mental health treatment)</li> <li>Canceled check along with statement from the service provider (if any).</li> <li>Other (specify)</li> <li>Specific receipts, billing statements, and corresponding canceled checks.</li> </ul> |  |
| <ul> <li>Copy of loan statements (including motor vehicle payment book and lines of<br/>credit) for all loans. Also provide a copy of any financial statements<br/>submitted to obtain credit in the past three years.</li> </ul>   |   |  |
| ADDITIONAL INSTRUCTIONS:  A personal interview has been scheduled for you with:   |   |  |
|   |   |  |
| U.S. Probation Officer  | on Date   |  |
| at Office Lo  | cation  |  |
| Time<br>Telephone   | G   |  |